CITY OF GRESHAM



Finance and Information Technology Business License Section

1333 NW Eastman Parkway Gresham, OR 97030-3813

Business License Application (Located out side Gresham City Limits)

Any person who engages in any business within the city, or transacts any business for the purpose of generating revenue, must first obtain a business license. This license shall be in addition to any other license requirement of the City, County or State. (City Code 9.05.020)

The Business License is effective for a 12 month period, beginning on the first day of the month that it was applied for. A late fee of \$5.00 (or 10% per annum-whichever is greater) will be charged on all accounts for every 30 days that the license fees are not paid. (City Code 9.05.050-080)

General Information: (Please Print or Write Legibly)

	•	8 77				
Business Name	9					
Location Addr	ess					
City, State, Zip	,					
Mailing Add	ress					
City, State, Z						
Business Phone		Fax Number				
E-mail Address			·			
Owner Informatio	on:					
Name						
Address						
City, State, Zip	,					
Mailing Add						
City, State, Z						
Emergency Contact:		Phone:				
Home/Other Phone:			SS. # or Fed	SS. # or Fed ID		
Date of Birth			Driver's Lie	Driver's License #		
Business Informa	tion·					
Type of Busine						
J 1		ice/goods you wil	l provide, sell	or manufa	acture:	
<u> </u>	F	J J	<u> </u>			
SIC Code or NAICS C				# Of Er	mployees:	
For office use only)				nto Gresham	
	yees (Owners C	Count as employees) 00 each:X \$3.00	Total Du	<u>\$</u> \$	75.00 per year 00.00 No fee	

PLEASE COMPLETE THE FOLLOWING INFORMATION IF IT APPLIES TO YOUR BUSINESS.

Home Based Businesses:	
State Registered Daycare Provider Adult	Care Home
All other types of Home Based Businesses must complete a Hom	ne Occupation Permit Application.
T . M.O. 4	-
Retail Sales:	
Will your business sell used items?	YesNo
Will you have a Musical device (juke box)?	YesNo
Will you have Coin Operated Amusement Devices?	Yes No
Will you offer Bingo or other Social games?	Yes No
The four error prince or enter events Annies.	165116
<u>Transportation Businesses:</u>	
Will you provide Taxi or other Transportation Services?	YesNo
Construction / Landscape Businesses:	
Construction Contractor Board License Number:	
Landscape Board License Number:	
Building Codes Agency License Number:	
Registration Type:	
Expiration Date:	
Exemption Status: Exempt	Non-Exempt
D (111	
Protoccional Liconcoc	
Professional Licenses:	
Please list all other licenses issued to you related to this busin	
<u> </u>	ness: License Number:
Please list all other licenses issued to you related to this busin	
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Please list all other licenses issued to you related to this busin Agency: Business Location:	License Number:
Please list all other licenses issued to you related to this busin Agency: Business Location: Home Office New Development	Name of
Please list all other licenses issued to you related to this busin Agency: Business Location: Home Office Industrial Park Other	License Number:
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(Business Owner or Contact Person)

Work Sheet To Calculate Fees

Na	me of Business:				
Ad	dress:				
	Calculating Fees:				
a.	Business License Fee	+	\$	75.00	
b.	1 to 2 Employees (Owner(s) count as employee)		\$	No Fee	
c.	3 or more employees (Coming into the City of Gresham)\$3 Number of Employees(-2) =X \$3.00 each +	3.00 each	\$		
To	tal Due (a +c) (Make checks payable to the City of Gresha	am)	\$		
	The term "employee" includes Owner(s) and includes the Gresham limits.	e number emplo	yees w	orking within	the City of
	*****	****			
	I declare by my signature that I have the authority to combelieve the information in the application is true, correct	-	the be	est of my kno	wledge I
	Signature of Business Owner or Contact Person	Date			
	m.a.				

Be sure to <u>include this worksheet</u> along with your Business license application and payment to the City of Gresham.

For Office Use Only

Route to:	Com	ments:
Business Licensing Carrie McKowen		
<u>Permits</u>	√	
Major Home Occupation	Permit #:	Date Approved:
Minor Home Occupation	Permit #:	Date Approved:
Notes and Follow Up:		
License Fees		Date Paid
Employee Fees		Clerk's Initials
Review Fee		
Total Received		
License Number		